

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
Byung Ju Dan

Art Unit: 3629

Serial No: 09/855,936

Filed: May 15, 2001

For: INTERACTIVE LEARNING DEVICE USING WEB-
BASED SYSTEM AND METHOD THEREFORE

Examiner: Traci L. Smith

Confirmation No. 9451

Mail Stop Amendments
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a NOTICE OF NON-COMPLIANT AMENDMENT in the above-identified application.

- ☐ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
- ☐ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.
- ☐ A petition for extension of time for ____ month(s) is enclosed.
- ☐ An information disclosure statement in accordance with 37 CFR 1.56 and 1.97 is enclosed.
- ☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	31	-	33 **	0	LG=\$50 SM=\$25	\$ 0
INDEPENDENT CLAIMS FEE	8	-	8 ***	0	LG=\$200 SM=\$100	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$290 SMALL ENTITY FEE = \$145	\$ 0
					TOTAL	\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☒ Please apply the filing fee in the amount of \$_____ to Deposit Account No. 50229.
- ☐ Please apply the extension fee of \$_____ to Deposit Account No. 502290.
- ☐ Please apply the RCE filing fee of \$_____ to Deposit Account No. 502290.
- ☐ Please apply the IDS filing fee in the amount of \$_____ to Deposit Account No. 502290.
- ☐ Please apply the petition fee in the amount of \$_____ to Deposit Account No. 502290.

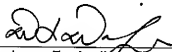
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 502290.
- ☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

Lee, Hong, Degerman, Kang & Schmadeka

Date: September 27, 2006

By: _____



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